

State Health Plan

Prevention

Partners

Avenues

Diabetes
Epidemic

Seventeen million people or 6.2 percent of the population in the United States have diabetes. While an estimated 11.1 million have been diagnosed, an additional 5.9 million people are not aware they have the disease. Each day approximately 2,200 people are diagnosed with diabetes. About one million people age 20 or older will be diagnosed this year. Diabetes is the fifth deadliest disease in the United States. In 1999, diabetes contributed to almost 210,000 deaths.

Diabetes is a chronic disease that has no cure. Of

Continued on page 2

The Inside
Spot

Managing for Tomorrow ... Page 2
Struggling to Breathe Page 2
Pre-Diabetes Page 3
Health Sen\$e Page 4

Chronic Disease Workshops—
An Ounce of Knowledge Provides
a Lifetime of Self-Protection!

If you have a chronic disease, the more you know about your condition, the healthier you will be. Prevention Partners offers free chronic disease workshops for all State Health Plan subscribers, their spouses, dependents and retirees. Workshops include *Asthma*, *Diabetes* and *Healthy Heart*. All chronic disease workshops focus on educating you to understand specific disease information, self-care education and associated risks of developing complications. This will empower you, the consumer, to make wise decisions concerning your treatment plan.

The Employee Insurance Program's State Health Plan Prevention Partners program recognizes and understands that consumers are better equipped to make wise decisions if they are educated about their illness, treatment plans, medications and daily management of their illness. Once diagnosed with a chronic disease the health consumer must anticipate a lifetime of self-care and management. Unlike "acute illness" which has a rapid onset and short, severe time course, a "chronic disease" may last a lifetime and may shorten a person's lifespan if not managed properly.

The goals of the workshops are to:

- Educate health consumers concerning their specific chronic disease;
- Provide up-to-date information on standardized treatment and medications;
- Encourage proper self-management and/or care for a dependant with a chronic disease;
- Learn what questions to ask physicians;
- Learn how to properly use the health care delivery system.

By providing free chronic disease workshops we hope you realize that chronic diseases do not always have to get worse. Your health and quality of life, if you already have a chronic disease, may improve, deteriorate or shift in either direction depending on how well informed and empowered you are to make the best decisions concerning your health. The goal of chronic disease education is not to cure those who have been diagnosed with a chronic disease, but to help individuals with a chronic disease maintain independence and a high level of functioning.

Continued on page 3

Managing For Tomorrow®

Persons with chronic conditions such as diabetes, heart disease or asthma know that taking care of themselves can be challenging. Going to the doctor only a few times a year is not enough. About 95 percent of chronic illness care is done by patients themselves. It's a 24-hours-a-day, seven-days-a-week effort. Being a good *self-manager* starts with understanding your condition and your doctor's plan of care.

That's why there's a new program that can help, available to active employees, spouses and dependents with the State Health Plan (health maintenance organization subscribers are not eligible). These individuals may receive a letter or phone call about a unique health management program known

as Managing for Tomorrow®. This program, sponsored by BlueCross BlueShield of South Carolina in cooperation with the State Health Plan Prevention Partners, will help them learn more about their conditions and ways to improve their health. It is voluntary and offered at no cost. Participants will not be asked to purchase anything, their benefits will not be affected and their premiums or copayments will not increase.

Managing for Tomorrow® starts with a confidential survey. The survey helps determine what health education materials are right for each person. Their invitation includes a special Personal Identification Number (PIN). This PIN will allow participants to complete the

survey either by calling an automated phone line or by logging on to a secure Web site. Paper surveys are also available.

Everyone who receives this invitation is encouraged to take part in the Managing for Tomorrow® program. Employees who think they qualify but haven't received an invitation may simply call the BlueCross Disease Management department at 1-800-925-9724. 🍷



Struggling to Breathe

According to the American Academy of Allergy, Asthma & Immunology approximately five million children in the United States have asthma. The U.S. Government Centers for Disease Control indicate that childhood asthma rates vary by race. In 1999, rates were 74 per 1,000 among blacks, 50 per 1,000 among whites and 44 per 1,000 among Hispanics. Asthma is marked by wheezing, shortness of breath, coughing and tightness of the chest.

One child in every 15 faces the challenges of asthma, and it gets harder for them once they begin school. The asthma rate is rising more rapidly in preschool-age children than in any other group. For school-age children, asthma is the second most common cause of chronic illness, after chronic sinusitis.

In 1995, children were hospitalized for treatment of asthma nearly 170,000 times at a total cost of about \$387 million. The debilitating effects of this condition cause 10 million missed school days each year.

While asthma deaths are rare, in 1998, the overall death rate was 3.5 per one million children. Death rates were similar in whites and Hispanics but were more than four times higher among blacks by the late 1990s.

Continued on page 3

Epidemic

Continued from page 1

the nearly 17 million Americans with diabetes, **90-95 percent** have Type 2 diabetes. Of these, roughly one-third are unaware they have the disease. Studies indicate diabetes is generally under-reported on death certificates, particularly in the cases of older persons with multiple chronic conditions such as heart disease and hypertension. Because of this, the toll of diabetes is believed to be **much higher** than reported officially. 🍷

Pre-Diabetes: What Does It Mean?

The American Diabetes Association and The U.S. Department of Health and Human Services are now using the term “pre-diabetes” to describe blood sugar levels that are higher than normal but not yet indicative of full-blown diabetes.

Diabetes, if not managed properly, can lead to blindness, kidney failure, limb amputation, heart disease and stroke. Therefore, it is very important for individuals who are diagnosed with pre-diabetes to monitor their glucose level closely, become more physically active and adopt good eating habits.

Left untreated, most people with pre-diabetes will go on to develop diabetes within 10 years. Simple lifestyle changes such as losing 5 to 10 percent of body weight and exercising 30 minutes a day can delay or prevent the disease and even return blood sugar levels to normal.

There are two tests used to measure blood glucose levels. The “fasting blood glucose test” measures blood sugar levels after fasting (usually 12 hours or before eating breakfast). The “oral glucose tolerance test” measures the body’s reaction to a sugary drink. The chart below lists fasting blood glucose and oral glucose tolerance test levels. 🍷

Fasting Blood Glucose Test	
Measurement	Diagnosis
Below 110	Normal
110 to 125	Pre-Diabetes
126 or above	Diabetes
Oral Glucose Tolerance Test	
Measurement	Diagnosis
Below 140	Normal
140 to 199	Pre-Diabetes
200 or above	Diabetes
Note: Blood glucose levels are measured in milligrams per tenth of a liter of blood.	

Asthma

Continued from page 2

But, Asthma is not just a childhood disease. In a recent review of studies, the Mayo Clinic found that asthma is becoming more common among people over age 65 signaling late-onset asthma which is often triggered by allergens or exercise. Over 40 percent of older adults with asthma are hospitalized at least once.

Although there is no known cure for asthma, the disease can be managed to reduce symptoms and prevent serious asthma attacks. Managing asthma begins with a plan developed by your doctor, based on your symptoms, triggers and peak flow meter readings. Medications that treat asthma are anti-inflammatory medications, which are the mainstay of asthma control management, and bronchodilators that are used to provide prompt relief during an asthma attack.

Health care costs for asthma patients rose dramatically from \$4.5 billion in the 1980s to \$10.7 billion in the 1990s, and costs continue to increase. According to researchers at the Agency for Healthcare Research and Quality who looked at outcomes and costs, treating patients with asthma in an emergency diagnostic and treatment unit rather than admitting them to the hospital resulted in an average cost reduction of \$1,000 per patient with no differences in relapse rates between the two groups.

At Prevention Partners, we believe the more you know about self-care and daily management of asthma as a chronic condition, what to do and who and when to call for assistance, the bigger the difference you can make in both outcomes and costs. If you would like to learn more about childhood or adult asthma, we can help. Our Asthma Chronic Disease Workshop will help you identify your personal asthma triggers, help you understand the importance of taking asthma medication properly and teach you about new tools for proper asthma management such as using a peak flow meter or how to avoid throat irritation (thrush) by using a spacer on your inhaler. To register for a free workshop visit our Web site at www.eip.state.sc.us, then click on the Prevention Partners logo, or call 803-737-3820 for more information. 🍷

Workshops

Continued from page 1

The information presented in the chronic disease workshops is not only for those individuals who have been diagnosed with a chronic disease, but also for individuals who are caregivers, have a family history of a specific chronic disease or would like to become knowledgeable about the prevention and management of chronic diseases. Prevention Partners encourages everyone to attend these free workshops, because an ounce of knowledge can provide a lifetime of self-protection!

For more information about chronic disease, visit our Web site at www.eip.state.sc.us then click on the Prevention Partners logo. You may also contact your Prevention Partners volunteer coordinator, benefits administrator or call our office at 803-737-3820. 🍷



The Cost Savings of Preventing Disease

Regular physical activity, fitness and exercise are crucial to the health and well-being of people of all ages. Everyone can benefit from regular physical activity, whether it's vigorous exercise or some type of moderate health-enhancing physical activity. Even among frail and very old adults, mobility and functioning can be improved through physical activity.

The problem with inactivity

Millions of Americans suffer from chronic illnesses that can be prevented or improved through regular physical activity. Recent studies found that 14 percent of all deaths in the United States were attributed to activity patterns and diet, and 23 percent of deaths from major chronic diseases were linked to sedentary lifestyles.

Physical activity has been shown to reduce the risk of developing or dying from heart disease, diabetes, colon cancer and high blood pressure. Despite these well-known facts, most adults and many children lead a relatively sedentary lifestyle and are not active. A sedentary lifestyle is defined as engaging in no leisure-time physical activity (exercises, sports, physically active hobbies) in a two-week period. Nearly 50 percent of adults reported no participation in leisure-time physical activity in a recent national survey.

Economic consequences of inactivity

Physically inactive people are at risk both medically and financially for many chronic diseases and conditions including heart disease, stroke, colon cancer, diabetes, obesity and osteoporosis. The increasing prevalence of chronic

medical conditions and diseases related to inactivity is associated with two types of costs. First, there are health care costs such as physician visits, pharmaceuticals, ambulance services, rehabilitation services and hospital and nursing home care. Second, there are other costs associated with the value of lost wages due to illness and disability as well as the value of future earnings lost by premature death. In 2000, the total cost of overweight and obesity was estimated to be \$117 billion. The total estimated cost from chronic disease is substantial as indicated in the chart at right.

A recent study demonstrated that obese individuals spend approximately 36 percent more than the general population on health services and 77 percent more on medications. Furthermore, the study found that the effects of obesity on health spending were significantly larger than effects of current or past smoking.

Physical activity and good physical health

Participation in regular physical activity—at least 30 minutes of moderate activity five days per week or 20 minutes of vigorous activity three times per week—is critical to sustaining good health. Youth should strive for at least one hour of exercise a day. Regular physical activity is beneficial and helps prevent a broad range of health problems and diseases.

Employers can benefit too. Workplace physical activity programs can reduce short-term sick leave 6-32 percent, reduce health care costs 20-55 percent, and increase productivity 2-52 percent. In 1998, 93 percent of employers

had programs that promoted employee health, up from 76 percent in 1992. Such wellness programs typically offer help in smoking cessation, managing stress, prenatal care, nutrition and fitness.

Source: U.S. Department of Health and Human Services at www.hhs.gov/news/press/2002pres/20020620.html

National Cost of Illness for Selected Diseases (in billions)

Disease	Cost
Heart Diseases	\$183
Cancer	157
Diabetes	100
Arthritis	65

SOURCE: National Institutes of Health, 2000

South Carolina Budget and Control Board

Jim Hodges, Chairman
Governor

Grady L. Patterson, Jr.
State Treasurer

James A. Lander
Comptroller General

Hugh K. Leatherman, Sr.
Chairman, Senate Finance Committee

Robert W. Harrell, Jr.
Chairman, House Ways and Means Committee

Frank Fusco
Executive Director

Avenues is produced by the
South Carolina Budget and Control Board
Employee Insurance Program

**The State Health Plan
PREVENTION PARTNERS**

Address all correspondence to:
Employee Insurance Program
1201 Main Street, Suite 830
Columbia, South Carolina 29201
803-737-3820